## Congressman Rush Holt

12<sup>th</sup> District, New Jersey 50 Washington Road Princeton Junction, NJ 08550 www.holt.house.gov

(609) 750-9365 PHONE

FAX (609) 750-0618



## WRITTEN AUTHORIZATION UNDER THE PROVISIONS OF THE PRIVACY ACT OF 1974

For Immigration/Naturalization Casework

Date:	
Dear Congressman Holt,	
I would like to request assistance with the following pro Immigration Services (formerly the INS). In keeping wit authorizing you and/or your staff to request information of the matter, outlined below.	
Please Print or Type:	
Mr. or Ms. (Circle One) Name:	
Other Names Used (Maiden, aliases, etc.): _	
Address:	
City:	ZIP:
Home Phone: Wo	ork/Cell Phone:
Email Address:	
Social Security: Alien	number: A
Date of Birth:	
Place of Birth:	
Form That Was Filed With USCIS:	
Date Filed With USCIS:	
USCIS Receipt Number:	
USCIS Office Where Form Was Filed:	
Signature	

Who paid for the petition/application? (Circle One)

1 paid	someone else paid	it was free
Information about the Petitic Mr. or Ms. (Circle One) Name:	oner (if applicable):	
Date of Birth:	Place of Birth:	
Alien Registration Number:	A	
Check one: [] U.S. Citizen	[] U.S. Lawful Permanent Resident other country (Which country?	·
Information about the Benef complete attached page 3) Name:	ficiary (if applicable): (for more th	van one beneficiary, please
Date of Birth:	Place of Birth:	
Alien Registration Number:		
	[] U.S. Lawful Permanent Reside	ent ("Green Card" holder)
[] Permanent resident of and	other country (Which country?	)
receipt notices or documents	Syour complaint or concern and at syou may have:	
What steps have you taken s	so far, and what have been the resu ons you have contacted?	ılts? Please include the
What would you consider a	fair outcome?	
Thank you.		

Please return this form to:

Rep. Rush Holt
50 Washington Road
West Windsor, New Jersey 08550
Fax: (609) 750-0618

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